

ATTACHMENT D

AUDIT REQUIREMENTS

Vendor Requirements

Vendor's responding to this Request for Services (RFS) must document the methods, practices, tools, and processes that will be employed to achieve the accomplishments outline in the Summary Scope of Work; as well as providing the deliverables detailed in the Audit Phases and Deliverable section. Additionally, the vendor shall disclose any overhead rates and details of fees.

The selected vendor must submit documentation covering the following in 15 pages or less:

1. Demonstrate expertise with auditing claims processing systems.
2. Document why your company is best able to meet the requirements of this RFS.
3. Provide at least (3) references for which your company has successfully completed this type of work.
4. Include resumes for key personnel that will work on this project.
5. List the standards that will be utilized to verify that data collection is/will be HIPAA compliant.

Audit Phases and Deliverables

All contract deliverables must be submitted to the Office of Medicaid Policy and Planning (OMPP) for review and approval. The selected vendor from this RFS is responsible for the following deliverables.

A. Audit Plan

The selected vendor must submit a detailed Audit Plan for state review and approval of each audit phases before proceeding to the next phase and at a minimum includes the following:

1. The selected audit categories that will be investigated. This will be based on the selected vendor's expertise in Medicaid Management Information System (MMIS) auditing, financial risks, financial impacts, and processing volumes.
2. An overall approach must be documented for the audit project.
3. Document the audit approach for each claim category.
4. A detailed audit schedule of activities, resources, durations, and target dates.
5. Define the involvement and support required from FSSA personnel and contractors.
6. Document test cases, test scripts, and expected results.

7. Document a process to keep the MMIS System & Health Policies synchronized.

B. Audit Execution

During Audit Execution, the selected vendor must follow the approved Audit Plan and perform the following activities:

1. Analyze and document the current data flow for selected claims categories.
2. Analyze and document the design and functional gaps between current policies and the MMIS System.
3. Review current system, security, control and process documentation for completeness and accuracy, and document findings and recommendations.
4. Perform identified test scripts.
5. Perform necessary activities to audit all identified audit categories.

C. Audit Reporting

The selected vendor must at minimum produce the following documentation as a result of the audit activity:

1. Detailed audit findings documenting the audit results from each audit category selected identifying:
 - a. discrepancies between current policies and the MMIS System,
 - b. gaps in documentation for the MMIS System,
 - c. deficiencies in system and business process controls,
 - d. discrepancies between reporting requirements and the current Management and Accounting Report (MAR) and CMS-64 Reports,
 - e. test script results,
 - f. recommended solutions where gaps are identified.
2. Document data flow diagrams for selected claim categories.
3. Provided suggestions for corrective actions.
4. Provide any assistance needed to FSSA for the understanding of the audit report and the suggested corrective actions.

D. Post Audit Review

1. Upon the Family and Social Services request, a Post Audit Review shall take place in approximately 6 months after the initial audit.
2. Document the success of the recommended corrective action.
3. Review any further corrective action.